

**CREDIT CARD PAYMENT**

**TO PAY BY CREDIT CARD FILL OUT THE FOLLOWING INFORMATION**

**PART A**

CARD NUMBER																				
EXPIRATION DATE	MO			YEAR					Amount (US Dollars) \$											
TYPE OF CARD	VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DISCOVER <input type="checkbox"/>																			
ACCOUNT HOLDER NAME																				
BILLING ADDRESS 1																				
BILLING ADDRESS 2																				
CITY																				
STATE/ZIP CODE								SIGNATURE												
COUNTRY																				

**NO CHARGE BACKS OR REFUNDS**  
**ALL SALES FINAL**

**PART B**

**IF YOU ARE USING YOUR OWN CREDIT CARD, THIS SECTION DOES NOT NEED TO BE COMPLETED.**

**NOTARY**

Subscribed and sworn before me by the above credit card account holder, this \_\_\_\_\_ day of \_\_\_\_\_, of the year \_\_\_\_\_.

Signature of Notary: \_\_\_\_\_

**(SEAL)**

Expiration Date of Commission: \_\_\_\_\_

## CREDIT CARD PAYMENT

**TO PAY BY CREDIT CARD FILL OUT THE FOLLOWING INFORMATION**

### **PART A**

CARD NUMBER																				
EXPIRATION DATE	MO			YEAR					AMOUNT (US Dollars) \$											
TYPE OF CARD	VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DISCOVER <input type="checkbox"/>																			
ACCOUNT HOLDER NAME																				
BILLING ADDRESS 1																				
BILLING ADDRESS 2																				
CITY																				
STATE/ZIP CODE															SIGNATURE					
COUNTRY																				

**NO CHARGE BACKS OR REFUNDS**  
**ALL SALES FINAL**

### **PART A INSTRUCTIONS**

- Card Number - 14 - 16 digit number from front of credit card
- Expiration Date - 2 digit month/4 digit year
- Amount in US Dollars: Enter amount to be charged to the credit card; this equals \$18 for each copy of a request
- Account Holder Name - this is the name on the credit card
- Billing Address - ensure billing address is correct and complete including country as applicable
- Signature - the name on the credit card should be the same person signing this form.

If there is any information missing, incomplete and/or incorrect the request will be returned. By signing this form, you agree that there will be **NO CHARGE BACKS OR REFUNDS AND ALL SALES ARE FINAL.**

**INSTRUCTION SHEET ONLY - DO NOT COMPLETE**

**PART B**

**IF YOU ARE USING YOUR OWN CREDIT CARD, THIS SECTION DOES NOT NEED TO BE COMPLETED.**

**NOTARY**

Subscribed and sworn before me by the above credit card account holder, this \_\_\_\_\_ day of \_\_\_\_\_, of the year \_\_\_\_\_.

Signature of Notary: \_\_\_\_\_

(SEAL)

Expiration Date of Commission: \_\_\_\_\_

**PART B INSTRUCTIONS**

**Credit Card Holder:** If you are using a credit card to pay for another person's request, you must have your signature notarized.

**Requestor:** If someone else is using their credit card to pay for your request, the credit card holder's signature must be notarized.

Please ensure that all areas are completed and that the notary signs and places their seal on this document.